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GENERAL HEADQUARTERS  
SUPREME COMMANDER FOR THE ALLIED POWERS  
Public Health and Welfare Section

WEEKLY BULLETIN

For Period

2 March - 8 March

1947

Number 10

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## SECTION I

### WELFARE

#### Private Welfare

There continues to be instances of certain individuals or groups who call upon Military Government personnel, as well as other members of the Occupation Forces, to secure verbal and/or written approval to establish a private welfare organization or institution. These interested parties not infrequently request a written statement encouraging their endeavor, which they in turn use to influence Japanese officials.

It is contrary to the policy of SCAP, for any member of the Occupation Forces, unless duly authorized, to act as an intermediary between private individuals or groups and the Japanese Government in matters which pertain to the approval of establishing new private welfare agencies. This does not preclude continued and vital interest in the private welfare agency field but the actual licensing of such agencies must be through normal Japanese government channels, without any outside influence other than that of those individuals, other than occupation forces, directly interested in the enterprise.

There also appears to be some question regarding the use of Japanese Government funds in establishing private welfare agencies. Under SCAP policy, "no governmental funds will be expended to establish a new private welfare agency."

#### Extension of Restrictions on Civilian Population Movement

The Home Ministry requested an extension to 31 December 1947 on the restrictions of free movement of civilian population in Japan. The Home Ministry considered the extension necessary inasmuch as there is no appreciable change in the food and shelter situation within the urban areas.

The request of the Home Ministry was approved as presented, and an Imperial Ordinance revising Imperial Ordinance No. 542 ("Urgent Measure Concerning the Control of Population Inflow into Urban Areas") will be issued.

#### Japanese Red Cross Society

The Japanese Red Cross, in an effort to meet the demands of personnel for increased salaries, has agreed to revise its pay scale on the same basis as revisions now being made for comparable classes of employees by the Japanese Government. The new salary scale will be put into effect following conferences to be held with Chapter and Hospital Directors at The National Headquarters (Tokyo), on 8 - 9 March 1947.

## SECTION II

### VETERINARY AFFAIRS

#### Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry), reported no new outbreaks of disease occurred during the period 2 - 8 March 1947.

## SECTION III

### DENTAL AFFAIRS

#### General

Out of the nations 22,288 primary and middle schools, 9693 have at

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least part time dental attendance. This service consists of periodical examinations, limited treatment, and instruction in oral hygiene.

Only ¥260,000 was appropriated by the national government for this program in 1946, but this amount was supplemented by varying amounts from each prefecture.

#### SECTION IV

##### NURSING AFFAIRS

The procedure manual for the Tokyo Demonstration school has been completed in Japanese. Publishing and printing privileges have been received from C.I. & E. Section and the publisher is ready to begin work as soon as paper is obtained. There will be 20,000 copies of the manual printed for the first edition and these will be made available to the schools of nursing.

The Communicable Disease Chart prepared by this Division has been approved by C.I. & E. and is being printed now. These charts will be made available to Public Health Nurses of Japan. Two thousand are being printed by News Company as a "complimentary gift", to the nurses.

#### SECTION V

##### SUPPLY

###### Production

The Welfare Ministry approved release of 10% DDT Dust and Typhus Vaccine as indicated below during the past week:

###### Typhus Vaccine

<u>Prefecture</u>	<u>Quantity</u>
Chiba	4,000 vials
Mie	1,440 "
Aichi	5,000 "
Kagawa	100 "
Okayama	2,000 "

###### 10% DDT Dust

Chiba	20,000
Mie	3,000
Yamaguchi	10,000
Aichi	20,000
Saga	27,000
Kagawa	5,000
Shizuoka	4,000

A total of 6775 gallons of 5% DDT residual effect spray was released to the following prefectures for disinfection of jails: Tottori, Shimane, Okayama, Shiga, Wakayama, Fukuoka, Hiroshima, Yamaguchi, Mie, Tokyo, Hokkaido, Aomori, Iwate, Miyagi and Akita.

Weekly progress report of the Welfare Ministry regarding production of medical supplies for antituberculosis campaign indicates a total of 9 photoroentographic machines and 6900 rolls of 35 mm film have been produced. A total of 82 photoroentographic machines remains on production program. Production of this quantity together with machines now on hand will make a total of 600 machines which is considered adequate. Production of the remaining 82 is expected prior to 30 April. Production of 100,000 rolls of 35 mm film monthly from 1 April - September 47 is scheduled

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Monthly report of the Welfare Ministry regarding production of absorbent cotton from American imported raw cotton indicates the following factual data:

Production during period 19 Jan - 15 Feb: 72,801 lbs.  
Total production to date: 355,952 lbs.  
Stock of raw cotton in factories: 572,351 lbs.  
Stocks of absorbent cotton 15 Feb: 355,952 lbs.

None of this production has been distributed. Distribution has been delayed because prices had not been established.

Prices have now been established and are as indicated below:

	<u>50 grams</u>	<u>100 grams</u>	<u>500 grams</u>
Manufacturers Price	3.34 yen	5.91 yen	26.35 yen
Wholesale Price	3.74 yen	6.62 yen	29.51 yen
Retail Price	4.49 yen	7.94 yen	35.41 yen

Penicillin program continues to gain momentum especially in relation to the development of the tank process. Designs and flowsheets of 9 different pilot plants have been examined in detail in consultation with engineers of the various companies. One company, Toyo-Rayon in Otsu has completed its fermentation pilot plant. Additional design studies are made daily in cooperation with various engineering staffs.

Detail design of first pilot plant freeze drying unit in Japan has been almost completed; installation will be in the Government Central Pilot Plant.

Request has been made for importation of American corn steep liquor to increase penicillin output and to conserve critical foodstuffs and processing chemicals which otherwise would be necessary.

#### Distribution

The Ministry of Health and Welfare reports that approximately two million 1/2 gram sulfathiazole tablets have been distributed to prefectures during the past two months. In addition a small reserve is being held in Tokyo and Osaka by the Central Medicine Distributing Company. Although the overall supply of sulfathiazole is limited, there would seem to be no reason why Japanese physicians could not secure a sufficient quantity for treatment of seriously ill patients in cases where the use of sulfathiazole is particularly indicated. When sulfathiazole is not available locally, the Prefectural Health Officer should immediately contact the Pharmaceutical Section of the Ministry of Health and Welfare giving specific information as to amount required.

#### Narcotics

Marihuana Control Regulations which were drafted by the Japanese Government have been received and approved. Possession, planting, cultivation or growing of marihuana and import, manufacture, compounding, selling, dealing in, dispensing, prescribing, administering or giving away marihuana are prohibited except that production for fiber purposes or for the purpose of research, instruction, or analysis will be permitted by persons licensed by the Minister of Welfare.

The districts and areas for marihuana cultivation will be determined by the Minister of Welfare and the Minister of Agriculture and Forestry. Arrangements for the designation of marihuana producers in the twelve selected prefectures are going forward on the national level. Military Government teams should assure that personnel have been appointed and other necessary arrangements made for licensing the appropriate persons in the prefectures as stated in SCAPIN 3203-A, 11 February 1947.

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SECTION VI  
PREVENTIVE MEDICINE

Typhus Fever

Comparative Score: (Includes figures of 5 March)

1946	- -	5,272
1947	-	484

Commuters Vaccination

Vaccination of commuters against typhus in Tokyo and Osaka areas began on 1 March. The work will be completed within two weeks.

Venereal Disease Control

The Welfare Ministry has been informed of their responsibility for aiding and encouraging the prefectures in the development of a comprehensive program for the prevention, control and cure of venereal diseases for all the people of Japan. Visits to the prefectures show that the clinics established thus far have been placed in operation solely on the initiative and interest of the Military Government Health Officer plus such dependable Japanese physicians that he can develop to carry out his instructions.

Using such national, prefectural or municipal facilities as are available, the Military Government Health Officer should establish several venereal disease diagnostic and treatment clinics for the public. These should be set up according to our standards, closely supervised, take good histories, physical examinations, attempt to bring the contacts in for diagnosis and treatment, and follow our treatment regimes strictly. These clinics, when properly supervised, should use American drugs. Such drugs should be ordered through Military Government channels in the usual manner. Do not allow good drugs to be wasted by untrained personnel using improper amounts or improper schedules.

The main use of prostitute hospitals is to keep as many prostitutes out of circulation as long as possible. Since these patients continuously become reinfected, this would be a proper group on whom to employ Japanese drugs, although these drugs may have to be supplemented by American drugs.

Military Government Health Officers should remember that a SCAP directive changes pre-existing Japanese laws. No prefectural or municipal health official should be allowed to shirk his duty by disclaiming authority to carry out projects under former Japanese laws. SCAPINS 48 and 153 give sufficient authority for the establishment of public venereal disease diagnostic and treatment clinics in prefectural and municipal health centers and in national, prefectural and municipal hospitals.

Laboratory Activities

A series of conferences held in Tokyo on the 25th, 26th and 27th February culminated two months of intensive work for setting up a Laboratory Control Program in Japan at the National level.

Eventually all phases of laboratory activity, both biological manufacture and clinical diagnostic, will be regulated under this program. Negotiations are being conducted to create a Japanese National Institute of Health, located in Tokyo and under the control of the Welfare Ministry.

Immediate efforts have been directed toward getting into operation a Biologics Control Program. A Laboratory Control Section will be under the Disease Prevention Bureau of the Welfare Ministry. This agency will carry out surveillance of laboratories to check for compliance with the official regulations through a system of inspectors, both local and national. As soon as these men are appointed, they will be given an intensive period of instruction in Tokyo. Upon their return to the



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peripheral areas, they will be directed to contact their respective Military Government Public Health officers to synchronize activities in this program. Public Health and Welfare's laboratory consultant will make frequent inspection trips to explain the details and to coordinate activities at the local level.

Every biological manufacturer in Japan had representatives attending the meeting on the 25th. The foregoing was explained in detail and was followed by an open discussion period. As soon as the Minimum Requirements regulating the operation of Biologics Manufacturing Laboratories are completed, they will be distributed to each Military Government Public Health Officer.

On the 26th and 27th, meetings were held with the technical personnel working with typhus, typhoid and para-typhoid vaccines. The official minimum requirements for these products are being forwarded to Military Government Teams for the information and guidance of Public Health Officers. Shortly, through Japanese channels, each Ken Director of Public Health and each biologics manufacturer in Japan will receive both English and Japanese copies, identical to those forwarded to Military Government.

Eventually Minimum Requirements will be drawn up for every biological produced in Japan.

In the inspection of laboratories, particular attention should be directed at carefully examining their production protocols, checking for compliance with the official "Minimum Requirements."

Following is the map location of Biologics Manufacturers' Laboratories in Japan:

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NAME OF LABORATORY

LOCATION

BIOLOGICALS PRODUCED

Prime Institute  
Aichi Kessei

Ebie Fukushima-Ku, Osaka City  
Shinpuikuji-Machi, Nishi-Ku, Nagoya-City

Chiba Kessei

Furusaku-Machi, Funabashi-City, Chiba Prefecture

Chiba Medical College \*  
Govt. Institute for Inf. Dis.

Yasaku-Machi, Chiba City, Chiba Prefecture  
Shiroganedai-Machi, Shiba-Ku, Tokyo-To

Tubercle Bacilli Vaccine "A-O."  
Diphtheria Anti-Serum  
Tetanus Anti-Serum  
Gas gangrene Anti-Serum  
Gas gangrene Bacillus Coli mixed  
Anti-Serum  
Typhoid and Paratyphoid Anti-  
Serum for diagnosis  
Etyphosus suspension for diagnosis  
Liquid Paratyphoid A and B Bacil-  
lus for Diagnosis  
Old Tuberculin diluted  
Typhoid and Paratyphoid mixed  
Vaccine  
Cholera Vaccine  
Whooping Cough Vaccine  
Typhoid Vaccine  
Diphtheria Antitoxin  
Typhus Vaccine  
Typhoid Vaccine  
Diphtheria Antitoxin  
Diphtheria toxoid  
Triple typhoid Vaccine  
Tetanus Antitoxin  
Cholera Vaccine  
Gas gangrene Anti-Serum  
Typhus Vaccine  
Cholera Vaccine  
Plague Vaccine  
Typhus Vaccine  
Small Pox Vaccine  
Triple Typhoid Vaccine  
Antirabies Vaccine  
Whooping cough Vaccine  
Staphylococcus Vaccine  
Mixed Staphylo and Strepto Vaccine  
Streptococcus Vaccine  
Diphtheria Antitoxin  
Antitetanic Serum

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NAME OF LABORATORYLOCATIONBIOLOGICALS PRODUCED

Govt. Institute for Inf. Dis.  
(continued)

Shiroganedai-Machi, Shiba-Ku, Tokyo-To

Antivenom Serum

Anti-Serum for Weil's Disease

Diphtheria Toxoid

Tetanic Toxoid

Stephylococcus Toxoid

Streptococcus Toxoid

Old Tuberculin,

Typhoid, Paratyphoid A and B  
for diagnosis

Diphtheria Antitoxin

Small Pox Vaccine

Diphtheria Toxoid

Antitetanic Serum

Typhus Vaccine

Diphtheria Antitoxin

Typhus Vaccine

Diphtheria Toxoid

Triple Typhoid Vaccine

Tuberculin

Streptococcus Vaccine

Staphylococcus Vaccine

E. Coli Vaccine

Erysipelas-Streptococcus Vaccine

Whooping cough vaccine

Cholera vaccine

Typhoid vaccine

Influenza and Pneumococcus mixed

Tuberculo-toxoidin

B. C. G.

Anti-diphtheria serum

Diphtheria Toxoid (Acetonal)

Vaccine virus

Anti-rebiles vaccine

Anti-streptococcus Serum

Streptococcus Vaccine

Vaccine (Watanabe's T.B. Vaccine)

Koch's old Tuberculin

Tuberculin for Mantoux skin test

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Japanese Anti-tuberculosis  
Association  
Kitasato Institute

Miseki-Cho, Kanda-Ku, Tokyo-To

Shirogane Sankei-Cho, Shiba-Ku, Tokyo-To

Ishigami Institute

Hemodere-Koen Minami, Sapporo-Gun, Osaka-Fu

Hokkaido Imperial University\*  
Hokuriku Kessei

Kita 12-Jyo, Sapporo City, Hokkaido  
Mishi-Machi, Kanazawa City, Ishikawa Prefecture

Hokkaido Seiyun Co., Ltd.

Minami 4-Jyo, Sapporo-City, Hokkaido







NAME OF LABORATORY

LOCATION

BIOLOGICAL PROCESSED

Kitasato Institute (cont'd.)

Shirogane Sanke-Cho, Shiba-Ku, Tokyo-To

Meningococcus Anti-Serum

Meningococcus Vaccine

Cholera Vaccine

Pertussis Vaccine

Dysentery Vaccine

Typhoid Vaccine

Shiga's anti-toxic dysentery serum

Triple Typhoid Vaccine

Anti-dysentery rabbit serum for

diagnostic use

Anti-tetanus serum

Staphylococcus Vaccine

Streptococcus Anti-serum & Vaccine

Staphylococcus antitoxin

Antistaphylococcal serum

Gas gangrene anti-serum

Leptospires anti-serum

Vaccine for Weil's disease

Typhus vaccine

Cholera Vaccine

Triple Typhoid Vaccine

Smallpox vaccine

Typhus Vaccine

Cholera Vaccine

Meningococcus Vaccine

Mixed vaccine of strepto and

staphylococcus

Staphylococcus Vaccine

Tuberculin

Diluted old tuberculin

Diagnostic suspension for typhoid

fever

Diagnostic suspension for para-

typhoid A and B

Typhoid vaccine (for preventive use)

Triple Typhoid Vaccine

Influenza vaccine

B. Coxi vaccine

Kyoto Biseibutsu Institute

Karasuma-ru-Dori, Chukyo-Ku, Kyoto City

Kyoto Imperial University \*

Kobe Eihei

Yoshida-Machi, Sakyo-Ku, Kyoto-City

Niben-Cho, Nagata-Ku, Kobe-City, Hyogo Prefecture







NAME OF LABORATORYLOCATIONBIOLOGICALS PRODUCED

Kumamoto Biological Institute Furukeyo-Machi, Kumamoto-City, Kumamoto Prefecture

Smallpox Vaccine  
Cholera Vaccine

Typhoid - paratyphoid mixed vaccine  
Lichtherie Anti-serum

Tetanus serum

Pertussis Vaccine

Diphtheria toxoid

Typhoid diagnosticum

Paratyphoid A and B diagnosticum

Typhus Vaccine

Mixed typhoid paratyphoid vaccine

Cholera Vaccine

Pertussis Vaccine

Mixed streptococcus vaccine

Cholera Vaccine

Triple typhoid vaccine

Cholera Vaccine

Typhoid Vaccine

Typhoid-paratyphoid mixed vaccine

Tuberculin

Diluted tuberculin

Anti-diphtheria serum

Typhoid vaccine

Typhoid paratyphoid mixed vaccine

Cholera vaccine

Streptococcus vaccine

Whooping cough vaccine

Smallpox vaccine

B. Coll vaccine

Normal horse serum

Stephylococcus vaccine

Stephylococcus, Streptococcus  
mixed vaccine

Anti-tetanus serum

Pneumococcus anti-serum

Tuberculin

Diluted tuberculin

Diphtheria toxoid

Ces gangrene anti-serum

Typhus vaccine

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Kumamoto Jikken Institute

Honjio-Cho, Kumamoto-City, Kumamoto Prefecture

Meguro Institute

Kanda Ueshime Ikeda-City, Osaka-Fu

Nitto Hoken

Nishi Fukuhi-Machi, Otokuni-Gun, Kyoto-Fu

Osaka Imperial University Inst. Dojima Nishi-Machi, Kite-Ku, Osaka City

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NAME OF LABORATORYLOCATIONBIOLOGICALS PRODUCED

Osaka Kessei

Kamihukushima Fukushima-Ku, Osaka-City

Small pox vaccine  
Diphtheria toxoid  
Typhoid paratyphoid mixed vaccine  
Diphtheria antitoxin  
Cholera vaccine

Osaka Saikin Institute

Kamihukushima Fukushima-Ku, Osaka-City

Tuberculin  
Diphtheria antitoxin  
Shallbox Vaccine  
TuberculinOsaka Ref. Cross  
Sankyo Company, Ltd.Otemae-no-Machi, Higashi-Ku, Osaka-City  
Furo-Machi, Mihonbashi-Ku, Tokyo-ToCholera vaccine  
Typhus vaccine  
Triple Typhoid Vaccine  
Diphtheria Antitoxin  
Cholera Vaccine  
Diphtheria toxoidTuberculin dilution for Mantoux  
reactionSuegawa Institute  
Takeda Company, Ltd.Shikishime-Machi, Tsuchiura-City, Ibaraki Prefecture  
Losho-Machi, Higashi-Ku, Osaka City

Vaccine of Ducrey's bacillus (Dugreyn) Diagnostic

Tohoku Boeki Institute

Kite 4-Ban-Cho, Sendai City, Miyagi Pref.

Shallbox Vaccine  
Diphtheria toxoid  
Staphylococcus Vaccine  
Diphtheria toxoid  
Diphtheria antitoxin  
Diphtheria toxin for Shick test  
Typhus Vaccine

Torii Company, Ltd.

Fon-Machi, Mihonbashi-Ku, Tokyo-To

Torigata Fendki Institute

Abeno-Suji, Abeno-Ku, Osaka-City

Cholera Vaccine  
Triple typhoid vaccine  
Influenza B. Koktigen  
Tuberculosis B. Koktigen  
Chancroid B. Koktigen  
Common coli B. Koktigen  
Typhoid B. Koktigen  
Pneumo-C Koktigen  
Mixed influenza B. and pneumo C.  
KoktigenInfluenza Meningo C. Koktigen  
Paratyphoid A. & B mixed Koktigen  
Strepto C. Koktigen  
Staphylo C. Koktigen



NAME OF LABORATORY

LOCATION

BIOLOGICALS PRODUCED

Torigata Meneki Institute  
(continued)

Abeno-Suji, Abeno-Ku, Osaka-City

Staphylo and Strepto C mixed  
Koktigen

Whooping cough Koktigen

Typhoid B and paratyphoid A & B  
mixed Koktigen

Dysentery B. Koktigen

Cholera V. Koktigen

Triple Typhoid vaccine

Cholera vaccine

Typhus vaccine

Smallpox vaccine

Diphtheria toxoid

Tetanus toxoid

Diphtheria antitoxin

Tetanus antitoxin

Meningococcus vaccine

Old tuberculin

Whooping cough vaccine

Leptospira Icterohaemorrhagica  
vaccine

Antiserum for Leptospira icterohaemorrhagica

Diphtheria toxoid

Yashima Company, Ltd.

Keji-Machi, Kanda-Ku, Tokyo-To

\* Produce only Epidemic Typhus Vaccine.

The following are Governmental Laboratories. Formerly, they were permitted to produce Typhoid para-Typhoid and Cholera Vaccine. With the exception of (a), (b) and (c), all of these laboratories are no longer to produce biologicals for distribution unless specific prior approval has been obtained from the Biologicals Control Sub-Section of the Welfare Ministry.

NAME OF LABORATORY

LOCATION

Aichi Prefecture Laboratory

Nagoya-City, Aichi-Prefecture

Fukuoka Pref. Laboratory

Fukuoka-City, Fukuoka-Prefecture

Fukushima Pref. Laboratory

Fukushima-City, Fukushima-Prefecture

Gifu Pref. Laboratory

Gifu-City, Gifu-Prefecture

Ishikawa Pref. Laboratory

Kanazawa-City, Ishikawa-Prefecture

Kanagawa Pref. Laboratory (a)

Yokohama-City, Kanagawa-Prefecture



NAME OF LABORATORY

Miyagi Pref. Laboratory  
Nagasaki Pref. Laboratory  
Nagoya-City Laboratory  
Niigata Pref. Laboratory  
Oita Pref. Laboratory  
Osaka-Fu Laboratory (b)  
Tokyo-To Laboratory (c)  
Toyama Pref. Laboratory  
Yamagata Pref. Laboratory  
Yamaguchi Pref. Laboratory

LOCATION

Sendai-City, Miyagi-Prefecture  
Nagasaki-City, Nagasaki-Prefecture  
Nagoya-City, Aichi-Prefecture  
Niigata-City, Niigata-Prefecture  
Oita-City, Oita-Prefecture  
Osaka-City, Osaka-Fu.  
Shibuya-Ku, Tokyo-To  
Toyama-City, Toyama-Prefecture  
Yamagata-City, Yamagata Prefecture  
Yamaguchi-City, Yamaguchi-Prefecture



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## SECTION VII

### SOCIAL SECURITY

#### Personnel

Mr. Leonard R. Anton, has been assigned to Public Health and Welfare Section, as Chief, Social Insurance Branch, of the Social Security Division.

#### Social Insurance

Considerable effort has been exercised in coordinating the various types of Social Insurances which will be affected with enactment of the Workmens' Accident Compensation Law. Pension Insurance and Health Insurance are to undergo changes, the basic point to be the difference between occupational and non-occupational diseases and accidents.

#### National Health Insurance

Additional emphasis was exhibited in behalf of National Health Insurance when representatives from all prefectures in Japan met in Tokyo to place the unification of their pleas before the Government for increased financial support. There were 160 present representing more than 40 million people. Each brought the desires and wishes of many people in the rural communities who are in need of adequate medical care facilities. The names of those attending the meeting are being recorded for information and reference to the Military Government Teams.

## SECTION VIII

### MEDICAL SERVICE

#### Hospital Report

Japanese Civilian Hospital Strength Report for the period ending 17 January 1947 shows 3,054 hospitals with a capacity of 216,462 beds, 94,641 of which were occupied. During this same period 256,369 out-patients were treated.

#### Medical Education

During and immediately prior to the war a large number (45) of second class medical schools (Semmon Gakko) were established in Japan to meet wartime medical requirements. These medical schools accepted large numbers of students directly from middle school (11th year of school) and were graduating them as licensed medical practitioners after a four year course of study. Some of these schools were attached to medical universities and others were established as separate and distinct private facilities.

The need for inspection and classification of these schools for purposes of evaluation of their present and future role in medical education was recognized early by the Japan Medical Council which recommended a group of inspectors to the Ministry of Education for the purpose of carrying out their plan of evaluation.

These inspectors were appointed by the Ministry of Education, completed their survey of the 2nd class medical schools of Japan and have divided these schools into Class A and B. PH & W, CI & E, the Japan Medical Council, Ministry of Education, and Ministry of Welfare recommended that class B schools cease to function at once, as schools for the preparation of, or graduation of, physicians, and that class A schools be allowed to graduate students until 1950 when they also will cease to exist as 2nd class medical schools.

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The results of the inspections and the final decision of the Ministry of Education regarding an interim program, will be distributed to schools concerned at an early date.

## SECTION IX

### CONSULTANTS

#### Nutrition Affairs

The Japanese Government is attempting to obtain the results of nutrition surveys at an earlier date. During the past week nutrition survey reports from Saitama, Chiba, Shiga, Iwate and Gumma prefectures and Osaka city on the food intake and deficiency symptoms, of weight deviations for Nagoya city and Kyoto prefecture were submitted by the Japanese Ministry of Health and Welfare.

At a press conference with SCAP, nutrition problems and future plans were discussed concerning the Japanese school lunch program.

## SECTION X

### MEMORANDUM TO IMPERIAL JAPANESE GOVERNMENT

FHMJG-13 30 Jan 47 - National Food and Nutrition Council for the Japanese

*Crawford F. Sams*  
CRAWFORD F. SAMS *by SCS*

Colonel, Medical Corps,  
Chief, Public Health and Welfare Section

2 Incls:

1. Weekly Summary Report of Cases and Deaths from Communicable Diseases in Japan, week ending 1 March 47, w/Digest.
2. Venereal Disease Report for week ending 1 March 47.

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Digest of Weekly Summary Report of Communicable  
Disease for the Week Ending 1 March 1947

Reports on the newly added communicable diseases are much more complete this week. Thirty-one prefectures reported a total of 2,218 cases and 361 deaths from tuberculosis. Twenty-seven prefectures reported for pneumonia, 1,284 cases and 209 deaths; whooping cough, 1,178 cases and 35 deaths; measles, 663 cases and 14 deaths.

Of the communicable diseases included in this report, those which accounted for the largest numbers of cases were diphtheria (690), malaria (174), typhoid fever (143), and epidemic meningitis (111). In terms of numbers of deaths the most important diseases were diphtheria (77) and epidemic meningitis (31). Reports for Nara, Wakayama and Kagoshima prefectures were not received in time to be included in the current report but their omission does not greatly affect the total for the country.

For the second consecutive week there was an increase in diphtheria cases (approximately 6 percent) from 651 cases for the week ending 22 February to 690 for the week ending 1 March 1947. Diphtheria deaths, however, declined approximately 17 percent from 93 to 77 in the current week. The current and cumulative case rates per 100,000 population were 49.2 and 48.8 respectively. The corresponding death rates were 5.5 and 5.1 respectively.

Dysentery cases remained about the same, increasing only from 49 to 53 in the current week; deaths increased from 7 to 11. The current case rate of 3.8 remained below the cumulative rate of 4.1 as did the current death rate of 0.8 compared with the cumulative rate of 1.0.

Typhoid fever cases (143) declined more than 20 percent from 183 in the previous week. Deaths (14) declined nearly 60 percent from 34 in the previous week. The current case rate (10.2) was significantly lower than the cumulative rate (16.4). The current death rate (1.0) was less than half of the cumulative rate (2.1).

Paratyphoid fever cases increased slightly from 32 to 38 but remained at a comparatively low level. There were 2 deaths compared with 3 in the previous week. The current case rate was 2.7 compared with a cumulative rate of 3.5. The current and cumulative death rates were 0.1 and 0.2 respectively.

Smallpox remained about the same. There were 10 cases and 3 deaths in the current week compared with 11 cases and 1 death in the previous week. The current and cumulative case rates were 0.7 and 1.0 respectively. Corresponding death rates were 0.2 and 0.1.

Epidemic typhus cases (27) were only slightly higher than in the previous week (24). There was 1 death compared with 3 the week before. The current case and death rates (1.9 and 0.1 respectively) remained well below the cumulative rates of 3.3 and 0.2.

Malaria cases (174) were approximately 15 percent greater than in the preceding week (150). Only 1 death was reported. The current and cumulative case rates were 12.4 and 11.0 respectively. Corresponding death rates were 0.1 and 0.05.

There continued to be no cholera.

Scarlet fever cases declined from 40 to 34 currently and deaths (2) remained about the same as in the previous week (3). The current and cumulative case rates were 2.4 and 3.1 respectively while the corresponding death rates were 0.2 and 0.1.

Epidemic meningitis cases continued to increase. The current number (111) was 28 percent greater than in the preceding week (87). Deaths (31) remained about the same as previously (33). The current case rate



of 7.9 was considerably higher than the cumulative rate of 4.3. The current death rate (2.2) was exactly double the cumulative rate (1.1).

There continued to be no Japanese B encephalitis or plague.

The current and cumulative number of cases of chancroid were 759 and 7,001; for gonorrhea, 3,527 and 29,589; for syphilis, 2,333 and 18,858.



SUMMARY REPORT OF CASES AND DEATHS FROM  
COMMUNICABLE DISEASES IN JAPAN  
WEEK ENDING 1 MARCH 1947

[illegible]



Weekly Report - 1 March 1947  
Continued

PREFECTURE	TYPHOID				PARATYPHOID			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	9	3	92	19	3	-	19	2
AOMORI	-	-	33	11	-	-	2	-
IWATE	-	1	24	3	-	-	5	-
MIYAGI	7	-	59	3	3	-	8	-
AKITA	-	-	7	-	-	-	1	1
YAMAGATA	2	-	60	17	-	-	15	1
FUKUSHIMA	5	-	82	4	-	-	7	1
IBARAKI	10	1	84	10	2	-	24	2
TOCHIGI	3	1	35	6	-	1	4	1
GUMMA	1	-	33	8	1	-	11	-
SAITAMA	1	-	49	1	-	-	4	3
CHIBA	1	-	67	5	1	-	23	1
TOKYO	12	2	121	19	2	-	47	2
KANAGAWA	4	-	100	12	-	-	14	1
NIIGATA	5	-	47	15	-	-	13	1
TOYAMA	5	4	34	8	-	-	4	-
ISHIKAWA	-	-	7	-	-	-	3	-
FUKUI	-	-	28	2	-	-	3	-
YAMANASHI	1	-	15	-	-	-	7	-
NAGANO	2	-	48	8	2	-	19	2
GIFU	3	* -11	42	1	2	-	13	1
SHIZUOKA	7	1	89	6	3	-	28	-
AICHI	4	4	85	9	2	-	23	1
MIE	7	-	74	8	2	-	21	1
SHIGA	1	-	11	2	-	-	3	-
KYOTO	2	-	41	13	-	-	5	1
OSAKA	8	1	41	3	4	-	21	1
HYOGO	6	-	85	12	-	-	8	-
NARA	NR	NR	13	1	NR	NR	-	-
WAKAYAMA	NR	NR	35	4	NR	NR	-	-
TOTTORI	1	-	26	2	-	-	2	-
SHIMANE	3	1	33	6	4	-	7	-
OKAYAMA	3	1	60	5	-	-	3	-
HIROSHIMA	9	2	116	12	2	-	14	-
YAMAGUCHI	2	-	30	-	-	-	3	-
TOKUSHIMA	2	1	34	5	-	-	5	2
KAGAWA	2	-	28	8	-	-	7	-
EHIME	1	-	25	3	1	-	2	-
KOCHI	6	1	56	7	1	-	9	-
FUKUOKA	4	1	57	5	1	1	13	1
SAGA	1	-	18	-	1	-	5	-
NAGASAKI	1	-	12	-	-	-	8	1
KUMAMOTO	1	-	12	-	-	-	3	-
OITA	-	-	5	-	-	-	2	-
MIYAZAKI	1	-	15	2	1	-	8	1
KAGOSHIMA	NR	NR	3	-	NR	NR	1	-
TOTALS	143	14	2071	265	38	2	447	28
RATE	70.2	1.0	16.4	2.1	2.7	0.1	3.5	0.2



Weekly Report - 1 March 1947  
Continued

PREFECTURE	MALARIA				CHOLERA			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	2	-	25	-	-	-	-	-
AOMORI	-	-	9	-	-	-	-	-
IWATE	1	-	36	-	-	-	-	-
MIYAGI	-	-	6	-	-	-	-	-
AKITA	2	-	27	-	-	-	-	-
YAMAGATA	1	-	10	-	-	-	-	-
FUKUSHIMA	2	-	30	-	-	-	-	-
IBARAKI	17	-	68	-	-	-	-	-
TOCHIGI	-	-	5	-	-	-	-	-
GUMMA	-	-	2	-	-	-	-	-
SAITAMA	-	-	1	-	-	-	-	-
CHIBA	2	-	17	-	-	-	-	-
TOKYO	6	-	83	-	-	-	-	-
KANAGAWA	14	-	62	-	-	-	-	-
NIIGATA	2	-	27	-	-	-	-	-
TOYAMA	1	-	7	-	-	-	-	-
ISHIKAWA	-	-	1	-	-	-	-	-
FUKUI	2	-	5	-	-	-	-	-
YAMANASHI	-	-	5	-	-	-	-	-
NAGANO	-	-	31	-	-	-	-	-
GIFU	-	-	-	-	-	-	-	-
SHIZUOKA	2	-	8	-	-	-	-	-
AICHI	6	-	60	-	-	-	-	-
MIE	3	-	32	-	-	-	-	-
SHIGA	4	-	48	-	-	-	-	-
KYOTO	3	-	28	-	-	-	-	-
OSAKA	-	-	4	-	-	-	-	-
HYOGO	1	-	30	-	-	-	-	-
NARA	NR	NR	12	-	NR	NR	-	-
WAKAYAMA	NR	NR	6	-	NR	NR	-	-
TOTTORI	10	-	28	-	-	-	-	-
SHIMANE	3	-	7	-	-	-	-	-
OKAYAMA	3	-	13	-	-	-	-	-
HIROSHIMA	17	-	34	-	-	-	-	-
YAMAGUCHI	1	-	31	-	-	-	-	-
TOKUSHIMA	7	-	59	-	-	-	-	-
KAGAWA	2	-	40	-	-	-	-	-
EHIME	5	-	51	-	-	-	-	-
KOCHI	2	-	15	-	-	-	-	-
FUKUOKA	28	1	191	2	-	-	-	-
SAGA	13	-	102	1	-	-	-	-
NAGASAKI	1	-	11	-	-	-	-	-
KUMAMOTO	3	-	25	-	-	-	-	-
OTTA	7	-	76	3	-	-	-	-
MIYAZAKI	1	-	9	-	-	-	-	-
KAGOSHIMA	NR	NR	13	-	NR	NR	-	-
TOTALS	174	1	1390	6	0	0	0	0
RATE								
Current	12.4	0.1	11.0	0.05	0.0	0.0	0.0	0.0
Previous	10.7	0.0			0.0	0.0		



Weekly Report - 1 March 1947  
Continued

PREFECTURE	SMALLPOX				EPIDEMIC TYPHUS			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	1	-	11	-	1	-	25	5
AOMORI	-	-	-	-	-	-	1	-
IWATE	-	-	-	-	-	-	-	-
MIYAGI	-	-	1	1	-	-	9	1
AKITA	3	-	8	1	-	-	-	-
YAMAGATA	2	3	4	3	-	-	-	-
FUKUSHIMA	-	-	-	-	1	-	1	-
IBATAKI	-	-	19	1	2	1	19	1
TOCHIGI	-	-	2	-	-	-	3	1
GUMMA	-	-	1	-	-	-	2	2
SAITAMA	-	-	2	1	-	-	16	2
CHIBA	-	-	13	2	-	-	17	1
TOKYO	-	-	-	-	10	-	67	6
KANAGAWA	-	-	1	-	1	-	12	1
NIIGATA	-	-	-	-	-	-	7	1
TOYAMA	-	-	-	-	-	-	3	-
ISHIKAWA	-	-	1	-	-	-	5	-
FUKUI	-	-	-	-	-	-	4	3
YAMANASHI	-	-	-	-	-	-	7	-
NAGANO	1	-	1	-	-	-	4	1
GIFU	-	-	-	-	-	-	17	-
SHIZUOKA	-	-	-	-	1	-	15	-
AICHI	-	-	-	-	2	-	91	1
MIE	-	-	-	-	-	-	4	-
SHIGA	-	-	-	-	-	-	-	-
KYOTO	-	-	-	-	2	-	5	-
OSAKA	1	-	9	2	2	-	23	-
HYOGO	1	-	10	2	-	-	1	1
NARA	NT	NT	-	-	NR	NR	2	-
WAKAYAMA	NT	NR	-	-	NR	NR	13	-
TOTTOPI	-	-	1	-	1	-	3	-
SHIMANE	-	-	5	-	2	-	5	-
OKAYAMA	-	-	1	-	-	-	2	-
HIOSHIMA	-	-	1	-	1	-	1	-
YAMAGUCHI	-	-	1	-	-	-	10	-
TOKUSHIMA	-	-	-	-	-	-	2	-
KAGAWA	-	-	1	-	1	-	11	3
EHIME	-	-	-	-	-	-	-	-
KOCHI	1	-	1	-	-	-	-	-
FUKUOKA	-	-	11	1	-	-	2	-
SAGA	-	-	-	-	-	-	-	-
NAGASAKI	-	-	1	-	-	-	7	-
KUMAMOTO	-	-	-	-	-	-	-	-
OITA	-	-	2	-	-	-	1	1
MIYAZAKI	-	-	-	-	-	-	5	-
KAGOSHIMA	NR	NR	18	-	NR	NR	-	-
TOTAL	10	3	126	14	27	1	422	31
RATE								
Current	0.7	0.2	1.0	0.1	1.9	0.1	3.3	0.2
Previous	0.8	0.1			1.7	0.2		

Rates per 100,000 per annum



WEEKLY SUMMARY REPORT  
OF  
VENEREAL DISEASES IN JAPAN

WEEK ENDING 1 MARCH 1947

(C) Current cases plus delayed reports  
(T) Total cases for year to date

PREFECTURE	CHANCROID		GONORRHEA		SYPHILIS	
	(C)	(T)	(C)	(T)	(C)	(T)
HOKKAIDO	36	235	102	1355	69	564
AOMORI	13	62	47	324	36	217
IWATE	3	22	19	135	31	185
MIYAGI	2	54	52	358	20	271
AKITA	4	38	35	319	26	206
YAMAGATA	1	48	20	279	20	293
FUKUSHIMA	8	71	53	456	59	404
IBARAKI	23	146	56	427	69	498
TOCHIGI	7	93	69	587	59	458
GUMMA	4	45	39	296	64	384
SAITAMA	21	167	101	576	61	405
CHIBA	13	175	52	597	32	422
TOKYO	53	385	169	1074	83	637
KANAGAWA	2	203	204	1892	74	549
NIIGATA	16	94	129	452	124	352
TOYAMA	7	66	45	362	21	216
ISHIKAWA	14	123	64	517	52	345
FUKUI	29	102	47	178	15	95
YAMANASHI	3	15	49	272	7	64
NAGANO	6	83	86	561	57	396
GIFU	1	160	67	525	7	257
SHIZUOKA	1	95	28	439	32	458
AICHI	83	619	319	2400	158	1112
MIE	32	262	56	449	44	292
SHIGA	25	212	27	247	20	167
KYOTO	NR	239	NR	942	NR	520
OSAKA	99	948	376	2973	302	2476
HYOGO	52	322	84	1191	132	1118
NAPA	NR	79	NR	117	NR	76
WAKAYAMA	24	140	68	420	28	199
TOTTORI	9	76	59	669	50	317
SHIMANE	1	34	28	248	52	277
OKAYAMA	23	226	98	679	49	317
HIFOSHIMA	31	137	154	868	79	365
YAMAGUCHI	3	38	32	397	13	316
TOKUSHIMA	3	21	10	148	17	194
KAGAWA	12	103	33	267	36	195
EHIME	4	48	42	510	54	544
KOCHI	15	50	53	286	30	212
FUKUOKA	37	542	174	1943	115	1009
SAGA	NR	43	NR	387	NR	297
NAGASAKI	14	113	207	941	44	327
KUMAMOTO	10	58	101	575	33	289
OITA	12	154	45	433	36	262
MIYAZAKI	1	27	13	228	14	180
KAGOSHIMA	3	28	15	290	9	121
TOTALS	759	7001	3527	29589	2333	18858
RATE						
Current	54.1	55.5	251.5	234.5	166.4	149.4
Previous	54.2		213.5		147.3	

Rates per 100,000 per annum

(From Japanese Sources)



Weekly Report - 1 March 1947  
Continued

PREFECTURE	SCARLET FEVER				EPIDEMIC MENINGITIS				JAP. B. ENCEPHALITIS			
	Current (C)	(D)	Cumulative (C)	(D)	Current (C)	(D)	Cumulative (C)	(D)	Current (C)	(D)	Cumulative (C)	(D)
HOKKAIDO	8	1	56	3	18	2	76	19	-	-	-	-
AOMORI	-	-	7	1	3	-	11	1	-	-	-	-
IWATE	1	1	5	1	2	1	6	3	-	-	-	-
MIYAGI	-	-	9	-	-	-	12	2	-	-	-	-
AKITA	-	-	9	1	2	1	14	7	-	-	-	-
YAMAGATA	-	-	8	-	-	-	7	1	-	-	-	-
FUKUSHIMA	1	-	9	-	4	1	17	5	-	-	-	-
IBARAKI	1	-	5	-	24	5	45	13	-	-	-	-
TOCHIGI	-	-	1	-	-	-	2	1	-	-	-	-
GUMMA	-	-	3	-	-	-	8	-	-	-	-	-
SAITAMA	-	-	8	-	3	3	17	6	-	-	-	-
CHIBA	1	-	9	-	4	4	15	7	-	-	-	-
TOKYO	6	-	77	1	34	9	126	31	-	-	-	-
KANAGA	1	-	16	-	2	-	7	5	-	-	-	-
NIIGATA	-	-	1	-	1	-	6	-	-	-	-	-
TOYAMA	-	-	3	-	1	-	2	-	-	-	-	-
ISHIKAWA	1	1	1	1	1	-	11	-	-	-	-	-
FUKUI	1	-	1	-	-	-	2	2	-	-	-	-
YAMANASHI	1	-	4	-	1	-	7	-	-	-	-	-
NAGANO	-	-	8	-	1	-	7	1	-	-	-	-
GIFU	-	-	2	-	-	1	3	2	-	-	-	-
SHIZUOKA	-	-	9	-	1	-	10	-	-	-	-	-
AICHI	1	-	18	1	-	-	4	-	-	-	-	-
MIE	1	-	6	-	-	-	5	1	-	-	-	-
SHIGA	-	-	7	-	-	-	3	2	-	-	-	-
KYOTO	2	-	42	1	-	-	11	2	-	-	-	-
OSAKA	-	-	12	-	2	-	16	3	-	-	-	-
HYOGO	2	-	12	-	1	1	15	4	-	-	-	-
NARA	NR	NR	-	-	NR	NR	-	-	NR	NR	-	-
WAKAYAMA	NR	NR	3	-	NR	NR	3	2	NR	NR	-	-
TOTTORI	1	-	3	-	-	-	5	-	-	-	-	-
SHIMANE	1	-	3	-	-	-	1	1	-	-	-	-
OKAYAMA	1	-	7	-	1	-	2	1	-	-	-	-
HIROSHIMA	1	-	2	-	-	-	4	1	-	-	1	1
YAMAGUCHI	-	-	3	-	-	-	6	2	-	-	-	-
TOKUSHIMA	2	-	3	-	-	-	3	-	-	-	-	-
KAGAWA	-	-	2	-	-	-	1	1	-	-	-	-
EHIME	-	-	4	-	2	2	8	5	-	-	-	1
KOCHI	-	-	-	-	1	-	5	1	-	-	-	-
FUKUOKA	-	-	2	1	-	-	25	7	-	-	-	-
SAGA	-	-	-	-	1	-	3	2	-	-	-	-
NAGASAKI	-	-	8	-	-	-	6	-	-	-	-	-
KUMAMOTO	-	-	-	-	-	-	3	1	-	-	-	-
OITA	-	-	-	-	1	1	4	1	-	-	-	-
MIYAZAKI	-	-	1	-	-	-	1	-	-	-	-	-
KAGOSHIMA	NR	NR	2	-	NR	NR	1	-	NR	NR	-	-
TOTAL	34	3	391	11	111	31	546	143	0	0	1	2
RATE												
Current	2.4	0.2	3.1	0.1	7.9	2.2	4.3	1.1	0.0	0.0	0.01	0.02
Previous	2.9	0.1			6.2	2.4						

Cumulative cases and deaths include all reported, beginning with the week ending 4 January through the current week for all diseases.

Rates per 100,000 per annum

Plague: 0

(From Japanese Sources)